

MVA320027760 / VAG - Kaki Bukit
 ENTRY DATE & TIME: 03/03/2020 13:51
 SUBMITTED BY: SITI FADHLON DTE ABDUL KADER

Your NCD will be affected due to late reporting
 Actual e-Filing Submission Date & Time: 03/03/2020 14:00

SINGAPORE ACCIDENT STATEMENT

AIG

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report 03/03/2020 13:51
 Date Of Accident 01/03/2020 01:55
 Exact Location Of Accident TAN TYE PLACE
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJC5030X
Insured/Policyholder
 Name Of Registered Owner VISCAR LEASING PTE LTD
 Co Reg No 2XXXXX983K
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-82003050

Vehicle Particulars

Manufacturer HONDA
 Model STREAM SUNROOF 1.8L A
 Exact Purpose for which vehicle was being used at time of accident
 Are you claiming under your own insurance policy for repair to your vehicle? NO
 If No, Please state action to be taken THIRD PARTY
 Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD
 Type Of Coverage THIRD PARTY
 Fleet Policy YES
 Policy Number 5115351780
 Cover Note Number

Driver

Name of Driver TAN GIM SONG (CHEN JINSONG)
 NRIC No SXXXX513A
 Date Of Birth 13/05/1978
 Occupation OUTDOOR
 Date Of Driving Pass 29/05/2000
 Driving Experience 19 YEARS AND 9 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-88177022
 Fax Number
 Contact Number
 EMail Address NOEMAIL

Address BLK 302A ANCHORVALE LINK #02-58
 Postcode 541302
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OTHER - NORMAL RENT
 Vehicle Registration Number of Driver's Own Vehicle -
 Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident SIDE SWIPE
 Weather Conditions CLEAR
 Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles (Including own vehicle) involved in the accident 2
 Was any body injured in the Accident? YES
 Was any injured conveyed to hospital by ambulance? NO
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER ATTACHED;

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLT9301A
 Vehicle Make/Model/Colour HONDA / VEZEL HYBRID SENSING 1.5X A
 Details Of Properties
 Vehicle Category PRIVATE CAR
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name AIG ASIA PACIFIC INSURANCE PTE. LTD.
 Nature Of Damage
 No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN GIM SONG (CHEN JINSONG)

Approximate Age

Injuries Sustained

Injured person in which vehicle?

SJC5030X

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

Address

BLK 302A ANCHORVALE LINK #02-58

Postcode

541302

SKETCH PLAN

1. Please report promptly the details of the accident to speed up the claims process.

2. This Form must be submitted by the policyholder and/or the Assured Party.

3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to rescind policy liability.

4. The insurer and acceptance of this Form by insurance companies is not a admission of policy liability on the part of the insurer or company.

5. This cover may not be referred to the Police for investigation.

6. The report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.

7. By the lodging of this report to the insurer, you hereby consent to the archiving of this report at the discretion and in place of the report being made available beforehand.

8. Consider under the Personal Data Protection Act (PDPA):

I understand, acknowledge, agree and ensure that:

(a) any insurer, reinsurer or any member insurance association of Singapore shall not be permitted to disclose, divulge and/or provide any personal data/business information set out by this Form and any other material information provided by me or disclosed by any insurer (collectively the "Personal Information") and details and transfer and personal information to all individuals who have been involved in this accident (all insured(s) who have been involved in this accident shall be collectively referred to as the "Insured(s)", the "Insured", "Insureds" or "Insureds") and any relevant government agency/partners (such as the police, for the purposes of:-

(i) processing, handling and/or dealing with any claims including the settlement of the claims and any necessary investigations relating to the claims

(ii) investigating the accident and/or any claims

(iii) carrying out and/or dealing with any investigations or responding to any enquiries by:-

(i) establishing any claims (including the making of any report and/or any necessary follow-up report or opinion to any relevant authorities disclosure of certain personal data to insurers for being about delivery of the claim and/or for the material cause of any loss/damage/accident/claim)

(ii) complying with applications for investigating, processing, handling and/or dealing with any claims (including the "Insureds")

(b) all Insured(s) who have insured a vehicle involved in the accident and the insurers' insurer shall not be permitted to collect, use, disclose and/or process any Personal Information for any purpose (if the vehicle is damaged and

(c) any Personal Information may/has been disclosed by any of the Insured(s) under GIA to third party persons/entities (including their insurer/insurers), which may be used outside of Singapore for the use or care of the above Insured(s)

(d) any Personal Information will go to be collected and used to compile claims history for the purpose of fraud detection, investigation and management to prevent and all future claims.

9. The information collected under this Form may be shared / disclosed:

(i) to all Insured(s) and/or any other party parties that arise in conducting, investigating, controlling or managing their relationship, law of claims and any court or arbitrator as appropriately required for the purposes stated or

(ii) for complying with a legal obligation.



Driver's Signature
 Be driver is not the policyholder
 Duke J. Oliver

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4 #02-02
Singapore 415933
Tel 67416687 Fax 67492305
Email: vac@idac.com.sg

Approved Country Personnel or Ambassador
Name _____
Signature _____

Accident Sketch Plan

A. STC 5030Y

B. SLT 9301A

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING STRAIGHT ALONG TAN TEE PL. SUDDENLY,
I FELT A LARGE IMPACT FROM THE RIGHT. I GOT
DOWN & ROLLING VEHICLE B (SLT 9301A) CAME OUT
FROM CLONG CARPENT FOR CARPENT. AND HIT ONE
MY VEHICLE RIGHT PORTION.

DECLARATION

I/We declare the following particulars are true in every respect.

Policyholder's Signature

Date & Time:

Date: 2014-03-03 Time: 14:27

Driver's Signature

(If driver is not the policyholder)

Date & Time:

IDAC KAKI BUKIT (VAC)

23 KAKI BUKIT AVE #02-02

Singapore 415933

Tel: 67418897 Fax: 67492305

Email: vacbk@vacom.com.sg

Applying Dealer's Signature

Please:

Stamp Here